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DANIELS &amp; DANIELS, P.A.

August 20, 2001

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OCT 04 2001

Assistant Commissioner for Patents  
BOX PATENT APPLICATION  
Washington, D.C. 20231

OFFICE OF PETITIONS  
DEPUTY A/C PATENTS

RE: U.S. Application for CAPACITY SCALING AND FUNCTIONAL ELEMENT  
REDISTRIBUTION WITHIN AN IN-BUILDING COAX CABLE INTERNET  
ACCESS SYSTEM  
Based on U.S. Provisional Application Serial No. 60/226,505 filed August 21, 2000  
Docket No. 0960-020

**Petition to Accept Declaration without Signature of Deceased Inventor**

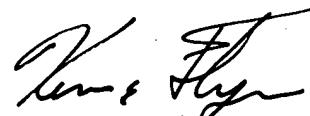
Dear Sir:

Please accept the attached "Declaration (37 CFR 1.63) for Utility or Design Application using an Application Data Sheet (37 CFR 1.76)" (Form PTO/SB/01A) that is unsigned by John B. Terry who died recently. It is uncertain when Mr. Terry's estate will be sent to probate court and as such, the undersigned requests acceptance of the attached Declaration.

The remaining inventor, Mr. Jeffrey A. Hales has signed the "Declaration (37 CFR 1.63) for Utility or Design Application using an Application Data Sheet (37 CFR 1.76)" and a facsimile copy is included in the filing.

Please contact the undersigned should you have any questions.

Sincerely



Kevin E. Flynn  
Reg. No. 37,325

Enclosures

F:\CL\0960-020\As filed\Petition.doc

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 355.00)

Complete if Known

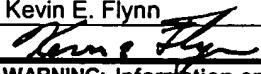
|                      |              |
|----------------------|--------------|
| Application Number   | Not Assigned |
| Filing Date          | Herewith     |
| First Named Inventor | Terry et al. |
| Examiner Name        | N/A          |
| Group/Art Unit       | N/A          |

1017 U.S. PATENT & TRADEMARK OFFICE  
09/933323  
08/20/01



Attorney Docket No. 0960-020

| METHOD OF PAYMENT (check one)  |                            |                 |        | FEE CALCULATION (continued)   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
|--|----------------------------|-----------------|--------|---|--------|--|--|----------------------------|----------------------------|-----------------|--|----------|-----|-----|-----|----|-------------------------------------|-----|----|-----|----|--|-----|-----|-----|-----|---------------------------|-----|-------|-----|-------|--|-----|------|-----|------|--|-----|--------|-----|--------|---|-----|-----|-----|----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|--|-----|-------|-----|-----|---|-----|-------|-----|-----|--|-----|-----|-----|-----|------------------|-----|-----|-----|-----|--|-----|-----|-----|-----|--------------------------|-----|-------|-----|-------|---|-----|-----|-----|----|----------------------------------|-----|-------|-----|-----|------------------------------------|-----|-------|-----|-----|--------------------------------|-----|-----|-----|-----|------------------|-----|-----|-----|-----|-----------------|-----|-----|-----|-----|-------------------------------|-----|----|-----|----|---|-----|-----|-----|-----|---|-----|----|-----|----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|--|---------------------------|--|--|--|--|---------------------------|--|--|--|--|--------------------------|--|--|--|------------------------|-----------------------------------|--|--|--|--|
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:<br>Deposit Account Number <input type="text"/>  |                            |                 |        | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td>Extension for reply within second month</td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td>Extension for reply within third month</td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695</td><td>Extension for reply within fourth month</td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945</td><td>Extension for reply within fifth month</td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>141</td><td>1,240</td><td>241</td><td>620</td><td>Petition to revive - unintentional</td></tr> <tr><td>142</td><td>1,240</td><td>242</td><td>620</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>143</td><td>440</td><td>243</td><td>220</td><td>Design issue fee</td></tr> <tr><td>144</td><td>600</td><td>244</td><td>300</td><td>Plant issue fee</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of information Disclosure Stmt</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>146</td><td>710</td><td>246</td><td>355</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>149</td><td>710</td><td>249</td><td>355</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td colspan="4">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="4">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="4">SUBTOTAL (1) (\$ 355.00)</td> <td>SUBTOTAL (3) (\$ 0.00)</td> </tr> <tr> <td colspan="4">*Reduced by Basic Filing Fee Paid</td> <td></td> </tr> </tbody> </table> |        |  |  | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |  | Fee Paid | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | 139 | 130 | 139 | 130 | Non-English specification | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | 115 | 110 | 215 | 55 | Extension for reply within first month | 116 | 390 | 216 | 195 | Extension for reply within second month | 117 | 890 | 217 | 445 | Extension for reply within third month | 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | 119 | 310 | 219 | 155 | Notice of Appeal | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | 121 | 270 | 221 | 135 | Request for oral hearing | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | 143 | 440 | 243 | 220 | Design issue fee | 144 | 600 | 244 | 300 | Plant issue fee | 122 | 130 | 122 | 130 | Petitions to the Commissioner | 123 | 50 | 123 | 50 | Petitions related to provisional applications | 126 | 240 | 126 | 240 | Submission of information Disclosure Stmt | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | Other fee (specify) _____ |  |  |  |  | Other fee (specify) _____ |  |  |  |  | SUBTOTAL (1) (\$ 355.00) |  |  |  | SUBTOTAL (3) (\$ 0.00) | *Reduced by Basic Filing Fee Paid |  |  |  |  |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description |        | Fee Paid  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 105  | 130                        | 205             | 65     | Surcharge - late filing fee or oath   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 127  | 50                         | 227             | 25     | Surcharge - late provisional filing fee or cover sheet  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 139  | 130                        | 139             | 130    | Non-English specification   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 147  | 2,520                      | 147             | 2,520  | For filing a request for reexamination  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 112  | 920*                       | 112             | 920*   | Requesting publication of SIR prior to Examiner action  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 113  | 1,840*                     | 113             | 1,840* | Requesting publication of SIR after Examiner action   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 115  | 110                        | 215             | 55     | Extension for reply within first month  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 116  | 390                        | 216             | 195    | Extension for reply within second month   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 117  | 890                        | 217             | 445    | Extension for reply within third month  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 118  | 1,390                      | 218             | 695    | Extension for reply within fourth month   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 128  | 1,890                      | 228             | 945    | Extension for reply within fifth month  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 119  | 310                        | 219             | 155    | Notice of Appeal  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 120  | 310                        | 220             | 155    | Filing a brief in support of an appeal  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 121  | 270                        | 221             | 135    | Request for oral hearing  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 138  | 1,510                      | 138             | 1,510  | Petition to institute a public use proceeding   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 140  | 110                        | 240             | 55     | Petition to revive - unavoidable  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 141  | 1,240                      | 241             | 620    | Petition to revive - unintentional  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 142  | 1,240                      | 242             | 620    | Utility issue fee (or reissue)  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 143  | 440                        | 243             | 220    | Design issue fee  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 144  | 600                        | 244             | 300    | Plant issue fee   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 122  | 130                        | 122             | 130    | Petitions to the Commissioner   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 123  | 50                         | 123             | 50     | Petitions related to provisional applications   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 126  | 240                        | 126             | 240    | Submission of information Disclosure Stmt   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 581  | 40                         | 581             | 40     | Recording each patent assignment per property (times number of properties)  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 146  | 710                        | 246             | 355    | Filing a submission after final rejection (37 CFR § 1.129(a))   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 149  | 710                        | 249             | 355    | For each additional invention to be examined (37 CFR § 1.129(b))  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| Other fee (specify) _____  |                            |                 |        |   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| Other fee (specify) _____  |                            |                 |        |   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| SUBTOTAL (1) (\$ 355.00)   |                            |                 |        | SUBTOTAL (3) (\$ 0.00)  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| *Reduced by Basic Filing Fee Paid  |                            |                 |        |   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
|  |                            |                 |        | Fee Description   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| Large Entity Fee Code (\$)         Small Entity Fee Code (\$)         Fee Description  |                            |                 |        | Fee Paid  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 101  | 710                        | 201             | 355    | Utility filing fee  | 355.00 |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 106  | 320                        | 206             | 160    | Design filing fee   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 107  | 490                        | 207             | 245    | Plant filing fee  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 108  | 710                        | 208             | 355    | Reissue filing fee  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 114  | 150                        | 214             | 75     | Provisional filing fee  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
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| <b>2. EXTRA CLAIM FEES</b><br>Total Claims <input type="text"/> -20**= <input type="text"/> 0 x <input type="text"/> 9 = <input type="text"/> 0.00<br>Independent Claims <input type="text"/> 1 -3**= <input type="text"/> 0 x <input type="text"/> 40 = <input type="text"/> 0.00<br>Multiple Dependent _____ |                            |                 |        |   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| *or number previously paid, if greater; For Reissues, see below<br>Large Entity Fee Code (\$)         Small Entity Fee Code (\$)         Fee Description   |                            |                 |        |   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 103  | 18                         | 203             | 9      | Claims in excess of 20  |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 102  | 80                         | 202             | 40     | Independent claims in excess of 3   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 104  | 270                        | 204             | 135    | Multiple dependent claim, if not paid   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 109  | 80                         | 209             | 40     | **Reissue Independent claims over original patent   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
| 110  | 18                         | 210             | 9      | **Reissue claims in excess of 20 and over original patent   |        |  |  |                            |                            |                 |  |          |     |     |     |    |                                     |     |    |     |    |  |     |     |     |     |                           |     |       |     |       |  |     |      |     |      |  |     |        |     |        |   |     |     |     |    |  |     |     |     |     |   |     |     |     |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |   |     |     |     |     |   |     |    |     |    |  |     |     |     |     |   |     |     |     |     |  |                           |  |  |  |  |                           |  |  |  |  |                          |  |  |  |                        |                                   |  |  |  |  |
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| SUBMITTED BY           |   |                                      |        |           |                 |
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| Complete if applicable |   |                                      |        |           |                 |
| Name (Print/Type)      | Kevin E. Flynn  | Registration No.<br>(Attorney/Agent) | 37,325 | Telephone | (919) 544 5444  |
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ASSIGNEE:

TERRY, JOHN B.

DOC DATE: 03/02/2001

ASSIGNEE:

JT LABORATORIES LLC, A GEORGIA  
LIMITED LIABILITY COMPANY

DOC DATE: 03/02/2001

ASSIGNEE:

JT INNOVATIONS, LLC, A GEORGIA  
LIMITED LIABILITY COMPANY

DOC DATE: 03/02/2001

ASSIGNEE:

COAXMEDIA, INC.  
1220 OAK, INDUSTRIAL LANE, SUITE B  
CUMMING, GEORGIA 30041

SERIAL NUMBER: 60226505

FILING DATE: 08/21/2000

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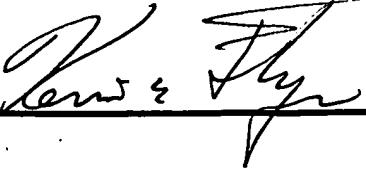
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JUNE 12, 2001

PTAS

DANIELS & DANIELS, P.A.  
KEVIN E. FLYNN  
P.O. DRAWER 12218  
RESEARCH TRIANGLE PARK, NC 27709



\*101659822A\*

UNITED STATES PATENT AND TRADEMARK OFFICE  
NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

PLEASE REVIEW ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 03/26/2001

REEL/FRAME: 011652/0372  
NUMBER OF PAGES: 5

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

HALES, JEFFREY A.

DOC DATE: 03/06/2001

ASSIGNEE:

COAXMEDIA, INC.  
1220 OAK INDUSTRIAL LANE, SUITE B  
CUMMING, GEORGIA 30041

SERIAL NUMBER: 60226505

FILING DATE: 08/21/2000  
PATENT NUMBER:

MARY BENTON, EXAMINER  
ASSIGNMENT DIVISION  
OFFICE OF PUBLIC RECORDS

COPY

STATE OF GEORGIA

Forsyth COUNTY

I, Andrea O'Connor, a Notary Public for Fulton County, Georgia,  
do hereby certify that JEFFREY Hales personally appeared before me this day and  
acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the 6<sup>th</sup> day of March, 2001.

Andrea O'Connor  
Notary Public

My Commission Expires March 13, 2004  
Notary Public, Fulton County, Georgia

My commission expires: \_\_\_\_\_

\DANIELS\_FSI\SYS\CL\0960-012\ASSIGN (Hales).doc

Page 3 of 3 of Assignment for United States Provisional Application Serial No. 60/226,505 for  
CAPACITY SCALING AND FUNCTIONAL ELEMENT REDISTRIBUTION WITHIN AN IN-BUILDING  
COAX CABLE INTERNET ACCESS SYSTEM  
Docket No. 0960-012



101659822

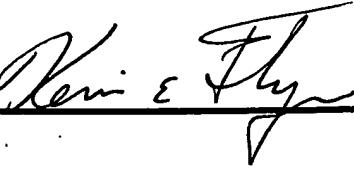
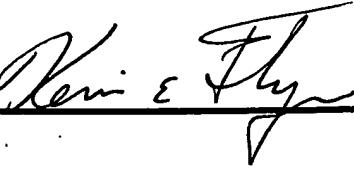
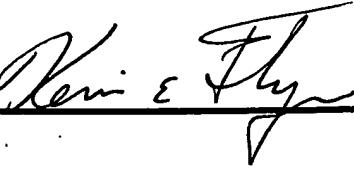
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| TO: The Commissioner of Patents & Trademarks:<br>Box Assignments,<br>Washington DC 20231 | Please record the attached original document(s) or copies. |                       |
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| NEW <input checked="" type="checkbox"/>  | ASSIGNMENT <input checked="" type="checkbox"/>             |                       |
| CONVEYING PARTY(IES)   | number of conveying parties <u>1</u> (if more than 1)      |                       |
| First party<br><br>NAME (line 1) Jeffrey A. Hales<br><br>NAME (line 2)                   | Execution Date<br><br>Month Day Year<br><br>March 6, 2001  |                       |
| Second party<br><br>NAME (line 1)<br><br>NAME (line 2)                                   | Execution Date<br><br>Month Day Year                       |                       |
| RECEIVING PARTY(IES)   | number of receiving parties _____ (if more than 1)         |                       |
| First Receiving Party<br><br>NAME (line 1) coaXmedia, Inc.<br><br>NAME (line 2)          |  |                       |
| ADDRESS (line 1) 1220 Oak Industrial Lane, Suite B<br><br>ADDRESS (line 2)               |  |                       |
| ADDRESS (line 3) Cumming<br><br>City   | GA<br><br>State/Country                                    | 30041<br><br>Zip Code |
| <b>Domestic Representative for first Receiving Party</b>                                 |  |                       |
| NAME<br><br>ADDRESS (line 1)<br>ADDRESS (line 2)<br>ADDRESS (line 3)<br>ADDRESS (line 4) |  |                       |
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| <b>Correspondent Name and Address</b>   |  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
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| Area Code and Telephone Number <b>919-544-5444</b>  |  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
| NAME: <b>Kevin E. Flynn</b><br>ADDRESS (line 1) <b>Daniels &amp; Daniels, P.A.</b><br>ADDRESS (line 2) <b>P.O. Drawer 12218</b><br>ADDRESS (line 3) <b>Research Triangle Park, NC 27709</b><br>ADDRESS (line 4)   |  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
| <b>PAGES</b> Total number of pages of the attached conveyance document including attachments <b>9</b>   |  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;"><b>APPLICATION NUMBER(s)</b></th> <th colspan="3"><b>PATENT NUMBER(s)</b></th> </tr> <tr> <td><b>60226505</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>   |  | <b>APPLICATION NUMBER(s)</b>   | <b>PATENT NUMBER(s)</b>  |                            |  | <b>60226505</b> |  |  |  |  |  |  |  |  |  |  |  |
| <b>APPLICATION NUMBER(s)</b>  | <b>PATENT NUMBER(s)</b>  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
| <b>60226505</b>   |  |  |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |
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| <b>Statement and Signature</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; vertical-align: top;">           Name of Person Signing<br/><br/>           Kevin E. Flynn<br/>           Reg. # 37,325<br/>           Daniels &amp; Daniels, P.A.         </td> <td style="width: 50%; vertical-align: top;"> <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.</i><br/><br/>           Signature       </td> <td style="width: 25%; vertical-align: top;">           Date:<br/> <b>03/23/2001</b> </td> </tr> </table> |  | Name of Person Signing<br><br>Kevin E. Flynn<br>Reg. # 37,325<br>Daniels & Daniels, P.A. | <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.</i><br><br>Signature  | Date:<br><b>03/23/2001</b> |  |                 |  |  |  |  |  |  |  |  |  |  |  |
| Name of Person Signing<br><br>Kevin E. Flynn<br>Reg. # 37,325<br>Daniels & Daniels, P.A.  | <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.</i><br><br>Signature  | Date:<br><b>03/23/2001</b>   |  |                            |  |                 |  |  |  |  |  |  |  |  |  |  |  |

PTO/SB/45 (08-00)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Terry et al.Application No./Patent No.: 60/226,505 Filed/Issue Date: August 21, 2000Entitled: Capacity Scaling and Functional Element Redistribution Within an In-building Cable  
Cable Internet Access System  
coaxmedia, Inc., a Corporation

(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of less than the entire right, title and interest.

The extent (by, percentage) of its ownership interest is \_\_\_\_\_ %

in the patent application/patent identified above by virtue of either:

A. [ ] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

B. [x] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Jeffrey A. Hales To: coaxmedia, Inc.

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2. From: John B. Terry At: Laboratories 101C/111 Innovations, LLC to coaxmedia, Inc.  
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[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

August 20, 2000

Date

G. Thomas Mitchell

Typed or printed name

Signature

Chief Operating Officer

Title

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